

## IC Memorandum 14-30

To: KEHP Insurance Coordinators (ICs)

From: Department of Employee Insurance (DEI)

Re: HumanaVitality ID Cards Sent to Cross-Reference Secondary Plan Members

Date: December 9, 2014

HumanaVitality ID Cards have been sent to all KEHP members. All were processed and sent correctly with the exception of about 7,500 cards sent incorrectly to secondary planholders in the Cross-Reference payment option.

Cross-Referenced family plans received two sets of cards.

- The envelope addressed to the Cross-Reference primary planholder contained cards for the family (planholder, spouse, and dependent(s)) and indicates a family plan.
- The other envelope was addressed to the secondary member and contained only the Cross-Reference spouse card and indicates employee only coverage – "EMP Subscriber".

Please let your members know that only the Family HV ID Card is valid.

The member ID on the employee only ID Card is <u>not</u> valid and will be rejected if the member tries to use it for a Vitality Check (biometric screening). We will send a letter to the secondary Cross-Reference members to inform them of the mistake.

Also, please note that members with dependents 18 and older (other than spouses) will receive their own cards that are valid. One card contains the entire family (planholder, spouse, and dependent(s) under 18). Other cards will be received for dependents 18 and over; these cards will contain the name of the planholder and the name of the over 18 dependent.

Note: Examples of cards are on the next page.







Subscriber! Group Name: KY EMPLOYEES' HEALTH PLAN Member ID: Wember Name:

Coverage Type: FAM Group ID: 735528

Example of valid card with Cross-Reference planholder and spouse (and any dependents under 18)

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This is NOT insurance.

Humana Vilality



Subscriber: 4 Group Name: KY EMPLOYEES' HEALTH PLAN Member ID: Member Name:

Coverage Type: EMP Group ID: 735528

Example of non-valid card with Cross-Reference spouse (do not use this card)

This is NOT insurance.

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Group Name: KY EMPLOYEES' HEALTH PLAN Member ID:

Member Name:

Coverage Type: FAM Group ID: 735528 Example of valid card with Cross-Reference planholder and over 18 dependent

This is NOT insurance.